<ul> <li>Complete items 1, 2, and 3. Also complitem 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the rev so that we can return the card to you.</li> <li>Attach this card to the back of the mails or on the front if space permits.</li> </ul>	erse Addressee
1. Article Addressed to:	D. Is delivery address different from item 1?  Yes If YES, enter delivery address below:  No 9490755
Ingram Barge Co. CT Corporation System Registered Agent for Ingram Barge Co 5615 Corporate Blvd., Suite 400B	
Baton Rouge, Louisiana 70808	3. Service Type  Certified Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number	
PS Form <b>3811</b> , February 2004	Domestic Return Receipt 102595-02-M-1540

## UNITED STATES POSTAL SERVICE



First-Class Mail Postage & Fees Paid USPS Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

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Ken Talton, Enforcement Officer

Ken Talton, Enforcement Officer

Sprivironmental Protection Agency

Sprivironmental Prot
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